

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

TENET HEALTHCARE CORPORATION PAC

ADDRESS (number and street)

13737 Noel Road, Suite 100

☐Check if different
than previously
reported. (ACC)

Dallas

TX

75240

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00119354

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Todd Plott

Signature of Treasurer

Electronically Filed by Todd Plott

Date

10

11

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TENET HEALTHCARE CORPORATION PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		11147.99
(b) Cash on Hand at Beginning of Reporting Period	11147.99	
(c) Total Receipts (from Line 19)	34950.29	34950.29
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46098.28	46098.28
7. Total Disbursements (from Line 31)	37000.00	37000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9098.28	9098.28
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION PAC

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 7

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	26375.29	26375.29
(i) Itemized (use Schedule A)		
(ii) Unitemized	8575.00	8575.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	34950.29	34950.29
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	34950.29	34950.29
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34950.29	34950.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34950.29	34950.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		26000.00	26000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		11000.00	11000.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		37000.00	37000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		37000.00	37000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	34950.29	34950.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34950.29	34950.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. JOSHUA GOLDMAN

Mailing Address 6505 REDPINE ROAD

City State Zip Code
DALLAS TX 75248-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2007

Transaction ID: 25545093

Amount of Each Receipt this Period

300.00

Tenet PAC

Full Name (Last, First, Middle Initial)

B. ROBERT STEPHENS

Mailing Address 5806 LONDON LANE

City State Zip Code
DALLAS TX 75252-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2007

Transaction ID: 25545100

Amount of Each Receipt this Period

260.00

Tenet PAC

Full Name (Last, First, Middle Initial)

C. SANDRA L WALKER

Mailing Address 17109 CLUB HILL DRIVE

City State Zip Code
DALLAS TX 75248-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2007

Transaction ID: 25545104

Amount of Each Receipt this Period

260.00

Tenet PAC

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. ROBERT KOCH

Mailing Address 11012 JEFFREYS BAY

City State Zip Code
FRISCO TX 75035-7342

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2007

Transaction ID: 25545110

Amount of Each Receipt this Period

260.00

Tenet PAC

Full Name (Last, First, Middle Initial)

B. BEN A RODRIGUEZ

Mailing Address 13305 NW 11TH PLACE

City State Zip Code
SUNRISE FL 33323-2933

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA MEDICAL CENTER

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2007

Transaction ID: 25645681

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. PAULA LECATES

Mailing Address 2192 N. OLA ROAD

City State Zip Code
MCDONOUGH GA 30252-4916

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2007

Transaction ID: 25645684

Amount of Each Receipt this Period

260.00

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
DAN BOWERS

Mailing Address 12467 TEJAS CT

City State Zip Code
RANCHO CUCAMONGA CA 91739-9071

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIMAS COMMUNITY HOSPI-
TAL

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: 25645688

Amount of Each Receipt this Period

260.00

B. Full Name (Last, First, Middle Initial)

GARY L STOKES

Mailing Address 4122 RIDGEBROOK

City State Zip Code
NACOGDOCHES TX 75965-2271

FEC ID number of contributing
federal political committee.

C

Name of Employer
NACOGDOCHES MEDICAL CENTER

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: 25645689

Amount of Each Receipt this Period

350.00

C. Full Name (Last, First, Middle Initial)

RUTH STEWART

Mailing Address 20089 WEST KEY DRIVE

City State Zip Code
BOCA RATON FL 33498-4541

FEC ID number of contributing
federal political committee.

C

Name of Employer
PALM BEACH GARDENS MEDICAL
CENTER

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: 25645691

Amount of Each Receipt this Period

260.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. JOHN F HOLLAND

Mailing Address 3610 EDGEWATER STREET

City State Zip Code
DALLAS TX 75205-4317

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: 25645693

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CRYSTAL L HAYNES

Mailing Address 3924 FLORA PLACE

City State Zip Code
ST. LOUIS MO 63110-3733

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAINT LOUIS UNIVERSITY HO-
SPITAL

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: 25662980

Amount of Each Receipt this Period

520.00

Tenet PAC - 2007

Full Name (Last, First, Middle Initial)

C. RODNEY A REASONER

Mailing Address 1715 MILLSTREAM DR.

City State Zip Code
CHESTERFIELD MO 63017-7749

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: 25662981

Amount of Each Receipt this Period

520.00

Tenet PAC - 2007

SUBTOTAL of Receipts This Page (optional)

3540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
 GARY J SLOAN
 Mailing Address 3246 BANFF DRIVE

City State Zip Code
 FAIRFIELD CA 94534-7865

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SAN RAMON REGION MEDICAL
 CENTER

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 7

Transaction ID: 25729777

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
 MITCHELL S FELDMAN
 Mailing Address 7021 W. CYPRESS HEAD DR

City State Zip Code
 PARKLAND FL 33067-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer
 TENET HEALTHSYSTEM

Occupation
 MARKET VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 7

Transaction ID: 25729808

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
 WILLIAM MASTERTON
 Mailing Address 50 BISCAYNE DR NW#6109

City State Zip Code
 SNELLVILLE GA 30309

FEC ID number of contributing
federal political committee.

C

Name of Employer
 ATLANTA MEDICAL CENTER

Occupation
 CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 25915702

Amount of Each Receipt this Period

260.00

SUBTOTAL of Receipts This Page (optional)

1760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)

Robert M Krieger

Mailing Address 611 Lavers Circle #397

City State Zip Code
 Delray Beach FL 33444-7991

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tenet Healthcare Corp

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 25915730

Amount of Each Receipt this Period

260.00

B. Full Name (Last, First, Middle Initial)

CLINT HAILEY

Mailing Address 3724 COUNTRY CLUB CIRCLE

City State Zip Code
 FORT WORTH TX 76109-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 25979098

Amount of Each Receipt this Period

500.00

Tenet PAC

C. Full Name (Last, First, Middle Initial)

DONALD LORACK

Mailing Address 4 GOLDEN POPPY

City State Zip Code
 COTO DE CAZA CA 92679-5118

FEC ID number of contributing
federal political committee.

C

Name of Employer
IRVINE REGIONAL HOSPITAL
MEDICAL CENTE

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 25997694

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL E TYSON
Mailing Address 5659 MIRAMAR DR

City State Zip Code
FRISCO TX 75034-5949

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: 26151524

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH LAMKIN
Mailing Address 31 WICKLOW DRIVE

City State Zip Code
HILTON HEAD SC 29928-3354

FEC ID number of contributing
federal political committee.

C

Name of Employer
HILTON HEAD HOSPITAL

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y

Transaction ID: PR1025760417181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
DALE ARMSTRONG
Mailing Address 1135 CARTHAGE ST

City State Zip Code
SANFORD NC 27330-4162

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL CAROLINA HOSPITAL

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y

Transaction ID: PR1025775817181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. JENNIFER DALEY

Mailing Address 5 CANDLEWICK CLOSE

City

LEXINGTON

State

MA

Zip Code

02421-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEMOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1039838817181

Amount of Each Receipt this Period

1080.00

P/R Deduction (\$192.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN J FERRELLI

Mailing Address 43 CAMINO REAL

City

RANCHO MIRAGE

State

CA

Zip Code

92270-4138

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHN F. KENNEDY MEMORIAL
HOSPITALOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1240924717181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHELLEY GILES

Mailing Address 3803 STOCKTON LN

City

DALLAS

State

TX

Zip Code

75287-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
IONOccupation
DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1479664417181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. THOMAS RICE

Mailing Address 15126 FERDINAND DR

City State Zip Code
DALLAS TX 75248-6437

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1592856017181

Amount of Each Receipt this Period

266.00

P/R Deduction (\$38.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

B. CHARLES CONKLIN

Mailing Address 3901 HEARST CASTLE WAY

City State Zip Code
PLANO TX 75025-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1592857217181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

C. RICKY JOHNSTON

Mailing Address 404 N.CHURCH ST

City State Zip Code
MCKINNEY TX 75069

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1592858217181

Amount of Each Receipt this Period

720.00

P/R Deduction (\$30.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1226.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
PETER URBANOWICZ JR

Mailing Address 5711 REDWOOD LANE

City State Zip Code
DALLAS TX 75209-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1735904717181

Amount of Each Receipt this Period

960.00

P/R Deduction (\$192.00 Bi-
Weekly)

B. Full Name (Last, First, Middle Initial)
DANIEL WALDMANN

Mailing Address 2001 19TH STREET NW #5

City State Zip Code
WASHINGTON DC 20009-1346

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1814798517181

Amount of Each Receipt this Period

960.00

P/R Deduction (\$80.00 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
CATHRYN H FRASER

Mailing Address 272 ENCLAVES COURT

City State Zip Code
COPPELL TX 75019-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2174559917181

Amount of Each Receipt this Period

266.00

P/R Deduction (\$38.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

2186.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 34

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. JEFFERY FLOCKEN

Mailing Address 27 NEW DAWN

City	State	Zip Code
IRVINE	CA	92620-1976

FEC ID number of contributing
federal political committee.**C**Name of Employer
TENET HEALTHSYSTEMOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2174567317181

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL HALTER

Mailing Address 111 RIGHTERS MILL RD

City	State	Zip Code
PENN VALLEY	PA	19072-1312

FEC ID number of contributing
federal political committee.**C**Name of Employer
HAHNEMANN UNIVERSITY HOSP-
ITALOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR406763217181

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. HAROLD O ANDERSON

Mailing Address 4623 STANFORD AVE

City	State	Zip Code
DALLAS	TX	75209-3115

FEC ID number of contributing
federal political committee.**C**Name of Employer
TENET HEALTHCARE CORPORAT-
IONOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407185017181

Amount of Each Receipt this Period

266.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1194.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial) LEONARD ROSENFELD			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407201317181	
Mailing Address 12213 PARK BEND DR			Amount of Each Receipt this Period 240.00	
City DALLAS	State TX	Zip Code 75230-2364		
FEC ID number of contributing federal political committee. C				
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)	
B. Full Name (Last, First, Middle Initial) STEVE BROWN			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407210617181	
Mailing Address 16 SARAH NASH CT			Amount of Each Receipt this Period 500.00	
City DALLAS	State TX	Zip Code 75225-2072		
FEC ID number of contributing federal political committee. C				
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation EVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Bi-Weekly)	
C. Full Name (Last, First, Middle Initial) CRAIG E SIMS			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407211617181	
Mailing Address 4515 MANNING LANE			Amount of Each Receipt this Period 230.76	
City DALLAS	State TX	Zip Code 75220-6434		
FEC ID number of contributing federal political committee. C				
Name of Employer TENET HEALTHCARE CORPORAT- ION		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.76	P/R Deduction (\$19.23 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)

970.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. JOHN F BEALLE

Mailing Address 7817 PENCROSS LANE

City State Zip Code
DALLAS TX 75248-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407214517181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN B MCDONALD

Mailing Address 2016 PEMBROKE AVE.

City State Zip Code
FORT WORTH TX 76110-1236

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP & amp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407215817181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT SMITH

Mailing Address 2723 LAKERIDGE

City State Zip Code
CARROLLTON TX 75006-4723

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407220017181

Amount of Each Receipt this Period

300.00

P/R Deduction (\$25.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. ROBERT S HENDLER

Mailing Address 11122 W RICKS CIRCLE

City

DALLAS

State

TX

Zip Code

75230-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation

REGIONAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407222817181

Amount of Each Receipt this Period

600.00

P/R Deduction (\$50.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

B. DEBRA L ANDONIE-WALL

Mailing Address 2687 CLEAR SPRINGS CT

City

RICHARDSON

State

TX

Zip Code

75082-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation

SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407226217181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

C. STEPHANIE SLOGGETT-O'DELL

Mailing Address 779 SOUTH BELLFLOWER DR

City

SPRINGFIELD

State

MO

Zip Code

65809-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407227017181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS E RABE

Mailing Address 9923 CAPRIDGE DR

City State Zip Code
DALLAS TX 75238-3469

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407227317181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

B. GARRY M OLNEY

Mailing Address 5301 ALPHA RD#126

City State Zip Code
DALLAS TX 75240-4317

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407234317181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM C HENNING

Mailing Address 2735 LONG GROVE DRIVE

City State Zip Code
MARIETTA GA 30062-8721

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTENNIAL MEDICAL CENTER

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407244717181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

720.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 34

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial) RALPH ALEMAN Mailing Address 7588 NW 51ST PLACE City CORAL SPRINGS State FL Zip Code 33067-2053 FEC ID number of contributing federal political committee. C Name of Employer TENET HEALTHSYSTEM Occupation MARKET VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR407245317181 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">240.00</td> </tr> </table> P/R Deduction (\$20.00 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y	240.00									
M	M	/	D	D	/	Y	Y	Y	Y													
240.00																						
B. Full Name (Last, First, Middle Initial) DAVID L ARCHER Mailing Address 2594 HOCKSETT COVE City GERMANTOWN State TN Zip Code 38139-6655 FEC ID number of contributing federal political committee. C Name of Employer SAINT FRANCIS HOSPITAL Occupation MARKET CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR407250417181 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">480.00</td> </tr> </table> P/R Deduction (\$40.00 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y	480.00									
M	M	/	D	D	/	Y	Y	Y	Y													
480.00																						
C. Full Name (Last, First, Middle Initial) DENNIS R BRUNS Mailing Address 980 18TH AVE CIRCLE NW City HICKORY State NC Zip Code 28601-1200 FEC ID number of contributing federal political committee. C Name of Employer FRYE REGIONAL MEDICAL CENTER Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR407251817181 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">240.00</td> </tr> </table> P/R Deduction (\$20.00 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y	240.00									
M	M	/	D	D	/	Y	Y	Y	Y													
240.00																						
SUBTOTAL of Receipts This Page (optional)		<table border="1"> <tr> <td>960.00</td> </tr> </table>	960.00																			
960.00																						
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																				

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 34

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
STEPHEN L NEWMAN MD, M.D.
Mailing Address 5301 ALPHA RD #453

City State Zip Code
DALLAS TX 75240-4368

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
IONOccupation
CHIEF OPERATING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR407257717181

Amount of Each Receipt this Period

768.00

P/R Deduction (\$192.00 Bi-
Weekly)

B. Full Name (Last, First, Middle Initial)
MICHELE C MEYER
Mailing Address 230 GRIMSLEY N. BLUFF

City State Zip Code
ST LOUIS MO 63129

FEC ID number of contributing
federal political committee.

C

Name of Employer
DES PERES HOSPITALOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR407268517181

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
PAUL D ECHELARD
Mailing Address 1167 HILLSBORO MILE#614

City State Zip Code
HILLSBORO BEACH FL 33062-1618

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOOD SAMARITAN MEDICAL CE-
NTEROccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR407270917181

Amount of Each Receipt this Period

230.76

P/R Deduction (\$19.23 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1226.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)

CRAIG C ARMIN

Mailing Address 23510 BERDON STREET

City State Zip Code
 WOODLAND HILLS CA 91367-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407274117181

Amount of Each Receipt this Period

300.00

P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

CANDACE MARKWITH

Mailing Address 980 ISABELLA WAY

City State Zip Code
 SAN LUIS OBISPO CA 93405-6186

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIERRA VISTA REGIONAL MED-ICAL CENTER

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407280317181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

MICHELE M FINNEY

Mailing Address 21521 TURTLEDOVE STREET

City State Zip Code
 TRABUCO CANYON CA 92679-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOS ALAMITOS MEDICAL CENT-ER

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR407283917181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. STEVE CORBEIL

Mailing Address 2063 KINGSPONTE DRIVE

City

CLARKSON VALLEY

State

MO

Zip Code

63005-4484

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR413940417181

Amount of Each Receipt this Period

544.00

P/R Deduction (\$96.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. EDWARD MESCO

Mailing Address 7365 NW 54TH STREET

City

LAUDERHILL

State

FL

Zip Code

33319-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHSYSTEM

Occupation
DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR839477817181

Amount of Each Receipt this Period

300.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TREVOR FETTER

Mailing Address 3821 BEVERLY DRIVE

City

DALLAS

State

TX

Zip Code

75205-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation
CEO AND PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.17

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR841482517181

Amount of Each Receipt this Period

1346.17

P/R Deduction (\$192.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2190.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. ANASTASIA B HUINER

Mailing Address 614 EAST ALAMAR AVE.

City

SANTA BARBARA

State

CA

Zip Code

93105-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION-HQ

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR841557817181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

B. SUZANNE KOZEL

Mailing Address 161 MEADOW RIDGE LN

City

CHAPEL HILL

State

NC

Zip Code

27517-8847

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATLANTA MEDICAL CENTER

Occupation

DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR843980417181

Amount of Each Receipt this Period

231.60

P/R Deduction (\$19.30 Bi-
Weekly)

Full Name (Last, First, Middle Initial)

C. PATRICIA L BRAINERD

Mailing Address 5412 GLENSHIRE DR

City

PLANO

State

TX

Zip Code

75093-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORAT-
ION

Occupation

SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR844644417181

Amount of Each Receipt this Period

300.00

P/R Deduction (\$50.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

771.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A.

Full Name (Last, First, Middle Initial)

IRENE CHAVEZ

Mailing Address 1340 LOMA VERDE

City

EL PASO

State

TX

Zip Code

79936-7811

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

COO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y

Transaction ID: PR846339317181

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

26375.29

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Friends of Baucus

Mailing Address PO Box 586

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement

Friends of Baucus - U.S. Senate - MT

Candidate Name

Max Baucus

011
Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

State: MT

District: 1

Transaction ID: 25321371

Date of Disbursement

01 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

Friends of Baucus - U.S.
Senate - MT

Full Name (Last, First, Middle Initial)

B. Friends of Baucus

Mailing Address PO Box 586

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement

Max Baucus - US Senate - MT

Candidate Name

Max Baucus

011
Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

State: MT

District: 1

Transaction ID: 25461578

Date of Disbursement

01 / 24 / 2007

Amount of Each Disbursement this Period

3000.00

Max Baucus - US Senate -
MT

Full Name (Last, First, Middle Initial)

C. Friends of Mary Landrieu

Mailing Address 503 Capitol Cour, NE
Suite 100

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Mary Landrieu, U. S. Senate - LA

Candidate Name

Mary Landrieu

011
Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

State: LA

District: 2

Transaction ID: 25321370

Date of Disbursement

01 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

Mary Landrieu, U. S. Sena-
te - LA

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Rangel For Congress

Mailing Address PO Box 5577
Manhattanville Sta

City New York State NY Zip Code 10027

Purpose of Disbursement
Charles Rangel, US Congress, NY

Candidate Name
Rep. Charles Rangel

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 15

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 25510612

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

Charles Rangel, US Congress, NY

Full Name (Last, First, Middle Initial)

B. Rangel For Congress

Mailing Address PO Box 5577
Manhattanville Sta

City New York State NY Zip Code 10027

Purpose of Disbursement
Void - Rangel For Congress

Candidate Name
Rep. Charles Rangel

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 15

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 25510616

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

-5000.00

Void - Rangel For Congress

Full Name (Last, First, Middle Initial)

C. Rangel For Congress

Mailing Address PO Box 5577
Manhattanville Sta

City New York State NY Zip Code 10027

Purpose of Disbursement
Charles Rangel, US Congress, NY

Candidate Name
Rep. Charles Rangel

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 15

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 25510617

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

Charles Rangel, US Congress, NY

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Lindsey Graham for U.S. Senate

Mailing Address 1620 Gervais Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement
Lindsey Graham, US Senate, SC

Candidate Name
Lindsey Graham

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 3

Transaction ID: 25791530

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

Lindsey Graham, US Senate,
SC

Full Name (Last, First, Middle Initial)

B. Blue Dog PAC

Mailing Address 236 Mass Ave NE, Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement
Blue Dog Coalition

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 25899518

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

5000.00

Blue Dog Coalition

Full Name (Last, First, Middle Initial)

C. Friends For Harry Reid

Mailing Address PO Box 19163

City Las Vegas State NV Zip Code 89132

Purpose of Disbursement
Harry Reid, US Senator, NV - Dist 1

Candidate Name
Sen. Harry Reid

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 1

Transaction ID: 25899560

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

2500.00

Harry Reid, US Senator,
NV - Dist 1

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Committee To Elect Artur Davis To Congress

Mailing Address 1812 4th Ave S, Apt 210

City Birmingham State AL Zip Code 35233

Purpose of Disbursement
Check Voided -

Candidate Name
Rep. Artur Davis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: AL District: 7

2006 US PRIMARY ELEC

Transaction ID: 25918751

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

-500.00

Check Voided -

Full Name (Last, First, Middle Initial)

B. John Spratt for Congress Comm.

Mailing Address P.O. Box 830

City York State SC Zip Code 29745

Purpose of Disbursement
John Spratt, US Congress, SC - 5

Candidate Name
John Spratt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 5

Transaction ID: 25978547

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

2500.00

John Spratt, US Congress,
SC - 5

Full Name (Last, First, Middle Initial)

C. Friends of Baucus

Mailing Address PO Box 586

City Helena State MT Zip Code 59624

Purpose of Disbursement
Max Baucus, US Senate

Candidate Name
Max Baucus

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District: 1

Transaction ID: 25996103

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

2000.00

Max Baucus, US Senate

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Committee To Elect Artur Davis To Congress

Mailing Address 1812 4th Ave S, Apt 210

City
Birmingham

State
AL

Zip Code
35233

Purpose of Disbursement
Artur Davis, US Congress - AL #7

Candidate Name
Rep. Artur Davis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 7

Transaction ID: 25996094

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

2500.00

Artur Davis, US Congress -
AL #7

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

26000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Citizens to Re-Elect Anna C. Verna

Mailing Address 1951 Retner Street
2nd Floor

City Philadelphia State PA Zip Code 19145

Purpose of Disbursement
Anna Verna, City Council President 2nd P

Candidate Name
Anna Verna

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2007 ☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 2

Transaction ID: 25663303

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

500.00

Anna Verna, City Council
President 2nd PA

Full Name (Last, First, Middle Initial)

B. Friends of Marian B. Tasco

Mailing Address P.O. Box 27454

City Philadelphia State PA Zip Code 19118

Purpose of Disbursement
Marian Tasco, City Council Member 9th PA

Candidate Name
Marian Tasco

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2007 ☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 9

Transaction ID: 25663302

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

500.00

Marian Tasco, City Council
Member 9th PA

Full Name (Last, First, Middle Initial)

C. Health Alliance PAC (HAPAC) - NonFederal State PAC

Mailing Address P.O. Box 8600

City Harrisburg State PA Zip Code 17105

Purpose of Disbursement
Health Alliance PA (HAPAC) - Direct Cont

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 25674303

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

Health Alliance PA (HAPAC)
- Direct Contribution

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. Texas Hospital Association PAC

Mailing Address P.O. Box 15587

City
Austin

State
TX

Zip Code
78761-5587

Purpose of Disbursement
TX HOS-PAC

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 25963576

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2007

Amount of Each Disbursement this Period

5000.00

TX HOS-PAC

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

11000.00

Image# 27990759014

Form/Schedule: **F3XA**

Report filed on 7/5/07 reported contribution to 'Friends of Max Baucus' for \$3,000 was for '06 US General election - should have been listed as '08 US General election.

Transaction ID:
